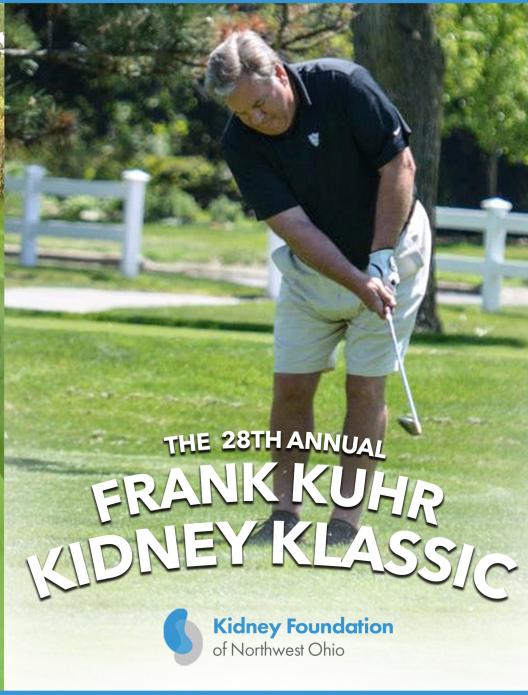
(SPACE IS LIMITED)





Scramble together a foursome! Invite friends, co-workers or business associates for a round of golf! All funds raised will help over 500 of our neighbors who are affected by chronic kidney disease.

HIGHLAND MEADOWS GOLF CLUB 7455 Erie St. Sylvania, OH 43560

PRESENTING SPONSORSHIP \$5,000 (1 Available)

- Four Foursomes 18 holes of golf, cart, lunch, & dinner
- Sign naming you as presenting sponsor of the event (provided by sponsor)
- Recognition in the program pamphlet
- Opportunity to present promotional display at outing

EAGLE SPONSORSHIP \$3,000 (2 Available)

- Three Foursomes 18 holes of golf, cart, lunch & dinner
- · Company recognition at choice of tee
- Recognition in the program pamphlet
- Recognition in media releases

BIRDIE SPONSORSHIP \$2,000

- Two Foursomes 18 holes of golf, cart, lunch & dinner
- Company recognition at one tee
- · Recognition in the program pamphlet
- Promotional banner displayed at outing (provided by sponsor)

GOLF BALL SPONSORSHIP \$1,500 (1 Available)

- One Foursome 18 holes of golf, cart, lunch, & dinner
- Company Name/logo on golf balls given to golfers **Must have logo by April 28th**
- Recognition in the program pamphlet

PAR SPONSORSHIP \$1,000

- One Foursome 18 holes of golf, cart, lunch & dinner
- Company recognition at one tee.
- · Recognition in the program pamphlet

BEVERAGE CART SPONSORSHIP \$500 (1 Available)

- Single golfer entry 18 holes of golf, cart, lunch & dinner
- Your name on the beverage cart for the day
- · Recognition in program pamphlet

GOLF CART SPONSORSHIP \$500 (2 Available)

- Single golfer entry 18 holes of golf, cart, lunch & dinner
- · Signage on staff golf carts for the outing
- · Recognition in the program pamphlet

HOLE SPONSOR \$350

- · Company recognition at one tee
- Recognition in the program pamphlet

TEAM REGISTRATION \$500

• Four golfer entries - 18 holes of golf, cart, lunch & dinner

INDIVIDUAL REGISTRATION \$125

• Single golfer entry - 18 holes of golf, cart, lunch & dinner

Monday, August 31st, 2020

Shotgun Start: 1pm | Registration: 11:30am Lunch & Dinner will be provided

Please list the names, addresses, emails and phone numbers of the golfers on your team. If you do not have confirmation yet, please update us at your earliest convenience by calling (419) 329-2196.

ADDRESS:			
PHONE:			
EMAIL:			
GOLFER 2:			
ADDRESS:			
PHONE:			
EMAIL:			
GOLFER 3:			
ADDRESS:			
ADDRESS: PHONE:			
PHONE:			
PHONE: EMAIL:			
PHONE: EMAIL: GOLFER 4:			

SPONSORSHIP LEVEL:	INDIVIDUAL TEAM REGISTRATION		
BUSINESS NAME (if applicab	le):		
CHECK ENCLOSED VISA	MASTERCARD		
CARD NUMBER:			
EXPIRATION DATE:	3 DIGIT CODE:		
Please make checks payable to : Kidney	Foundation of Northwest Ohio. No refunds for cancellations after 8.21.20.		

Please Send Registration & Payment to: Kidney Foundation of Northwest Ohio 3100 West Central Ave., Suite 150, Toledo, OH 43606 or Fax to: (419) 531-6080

QUESTIONS? PLEASE CONTACT:

Rachelle Van Den Berghe | (419) 329-2196 | administrative assistant@kfnwo.org